

North Dakota

Department of Human Services – HCBS Rate Study Project
**Deliverable 5.1 Summary of Cost Survey
Findings**

October 21, 2022



CBIZ Optumas

Consultants • Actuaries • Economists

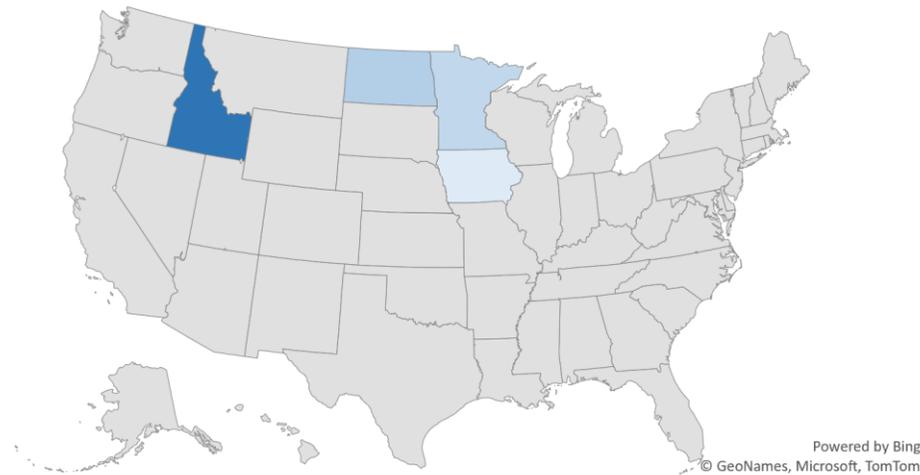
Overview

- An electronic survey, using Qualtrics survey software, was sent out to qualified service providers registered with the North Dakota Aging Division.
- There were a maximum number of 28 questions (including logic-based questions that skipped to the next appropriate question depending on the response).
- Total survey respondents: 74
- Total survey participants: 27 or 36% of those who started the survey completed it.
- Not all 27 participants responded to each question.
- Total respondents are identified using '*n*' for each survey question.

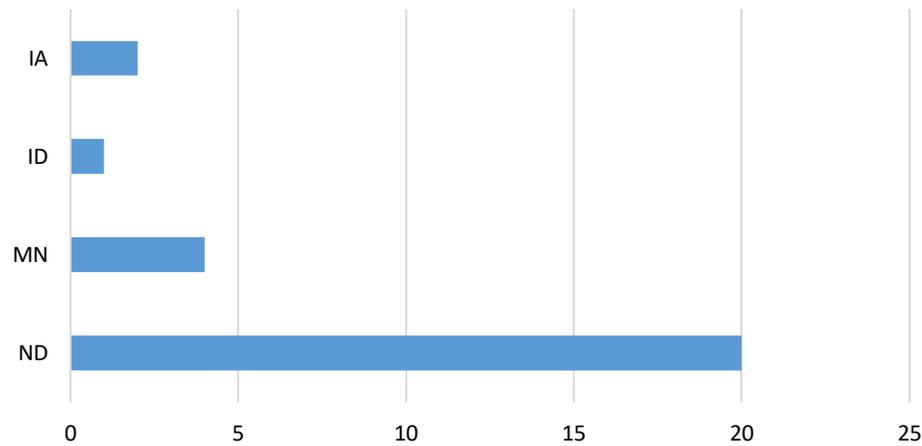
Provider Location & Place of Service

Qualified Service Providers (QSPs) responding to this survey are located within North Dakota, and surrounding states, or have corporate offices in other states with franchise offices in North Dakota. Out of 74 QSP respondents, 27 responded to this survey question.

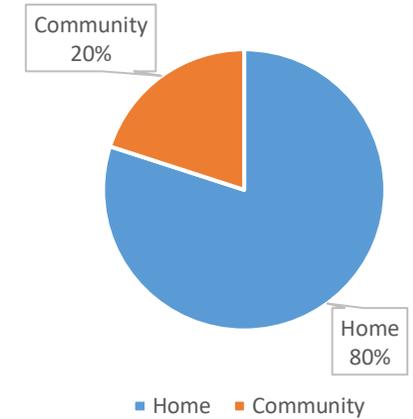
Provider Location



Provider Location

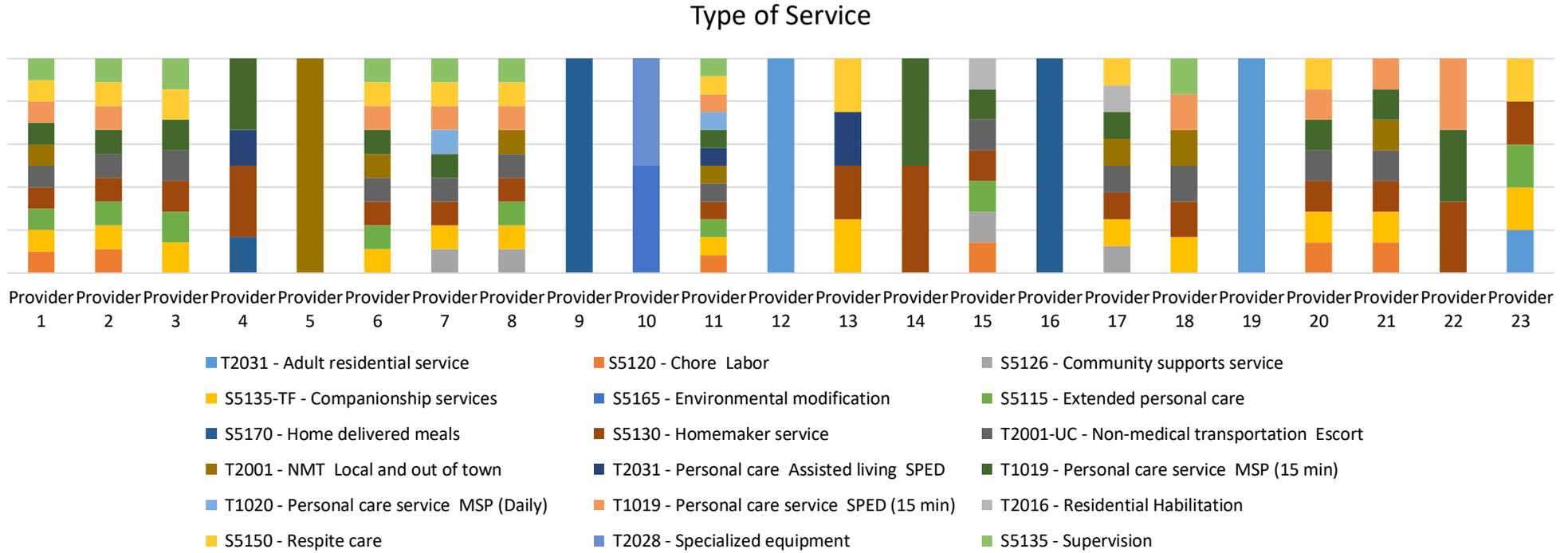


Place of Service



Types of Service

Providers were asked to identify all types of services they provide. This chart depicts the variety of services each provider offers (n=23). Confidential responses have also been provided to DHS for detail.



Types of Service

This table shows the number of QSPs that provide each service type.

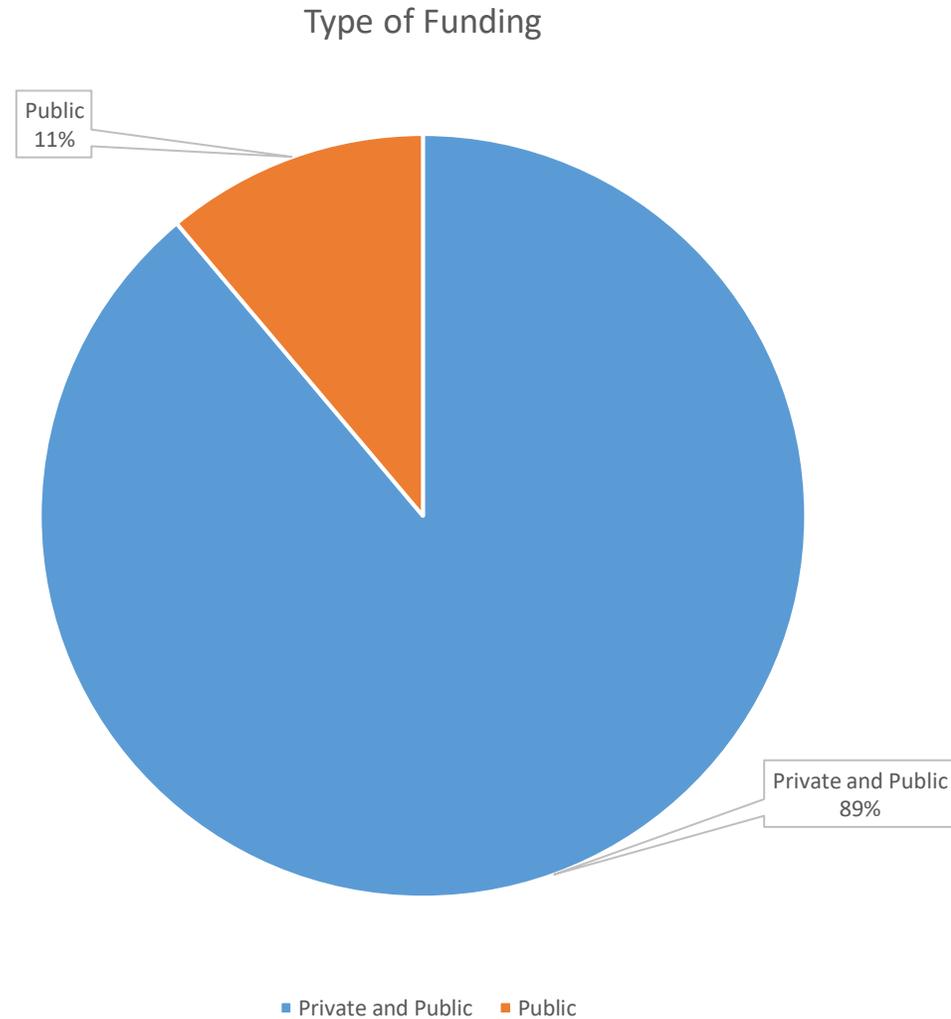
Type of Service	Count of QSPs Providing Service
T2031 - Adult residential service	3
S5120 - Chore Labor	6
S5126 - Community supports service	4
S5135-TF - Companionship services	13
S5165 - Environmental modification	2
S5115 - Extended personal care	8
S5170 - Home delivered meals	3
S5130 - Homemaker service	18
T2001-UC - Non-medical transportation Escort	12
T2001 - NMT Local and out of town	8
T2031 - Personal care Assisted living SPED	3
T1019 - Personal care service MSP (15 min)	14
T1020 - Personal care service MSP (Daily)	2
T1019 - Personal care service SPED (15 min)	10
T2016 - Residential Habilitation	2
S5150 - Respite care	11
T2028 - Specialized equipment	2
S5135 - Supervision	8

Type of Funding - Average

What percentage of your business is publicly funded?

Of the 27 respondents, 89% accepted both private and public funding, while 11% were only publicly funded.

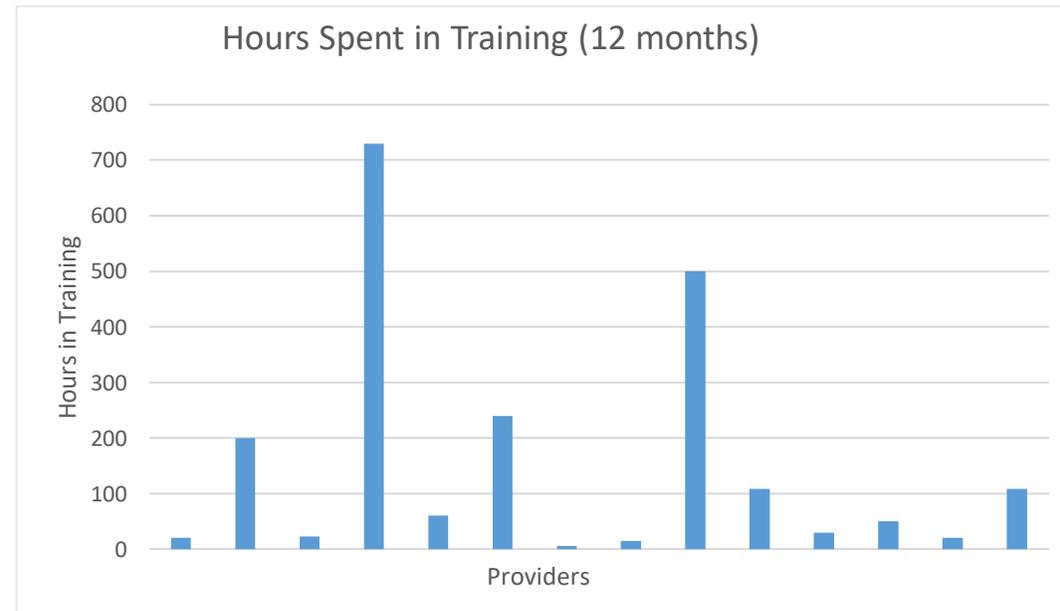
- Private and Public = 24
- Public only = 3



Provider Training

- 14 providers responded to the question regarding how many hours providers spend in training and the cost of the training.
- Combined total hours spent in training by all QSPs responding to the survey is 4,637 hours at a total cost of \$86,624.25.
- Average hours per QSP in training is 231.85 hours.
- Average amount spent on training is \$4,331.21.

Hours Spent Training	Cost of Training
4,637	\$86,624.25



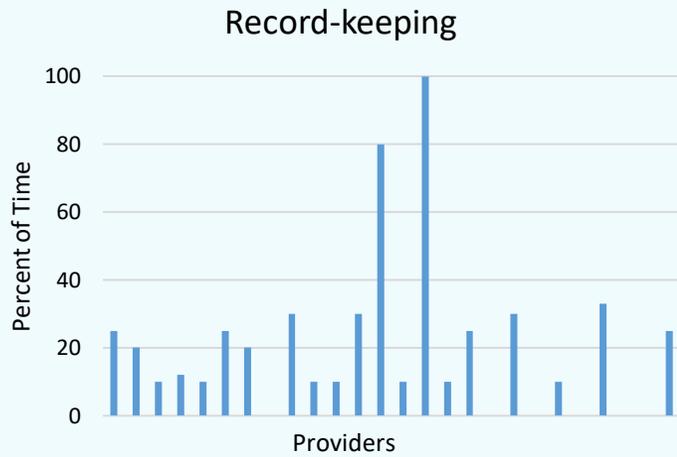
Breakdown of average time spent by QSPs



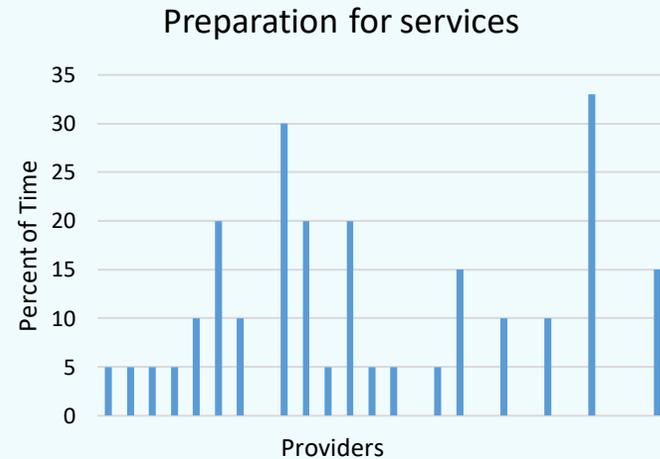
- Providers were asked to fill out a selection of choices describing how much time they spend on certain activities as a percentage of hours.
- The activities included:
 - Record-keeping for administrative services.
 - Preparation for services.
 - Providing services to clients.
 - Travel time between individuals receiving services.
 - Other time necessary for providing services.
- 20 of the 27 providers responded to this question.
- Charts reflecting the percentage of time spent providing the most commonly reported services are presented on the next two slides.

Average Time Spent Per Week

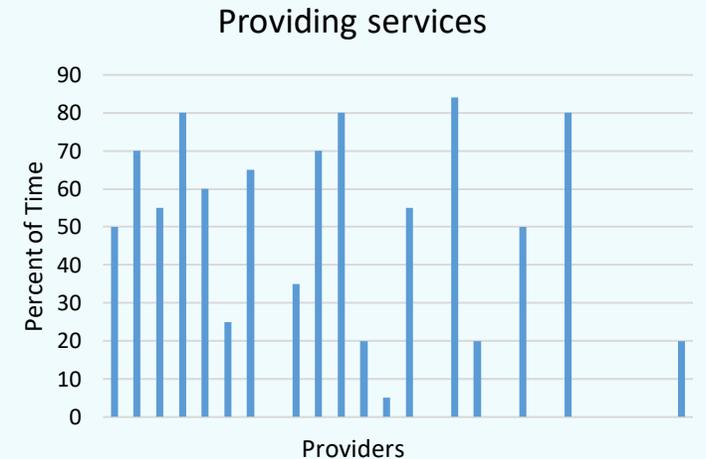
Record Keeping



Preparation for Services

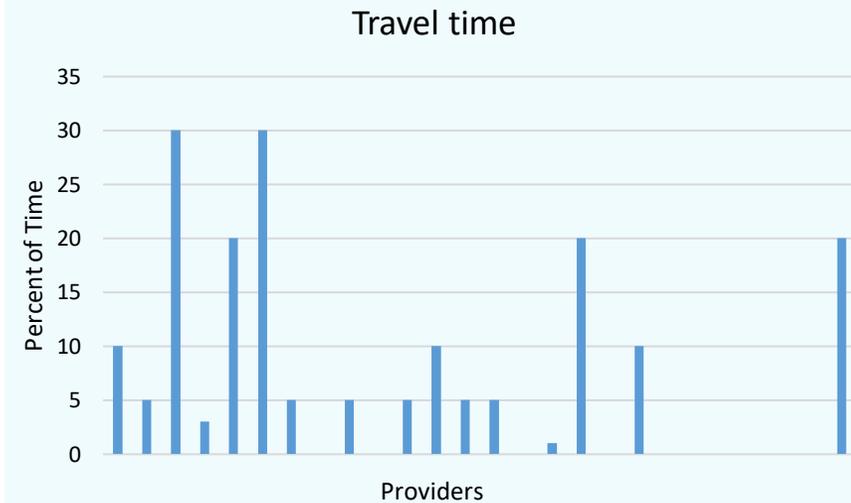


Providing Services

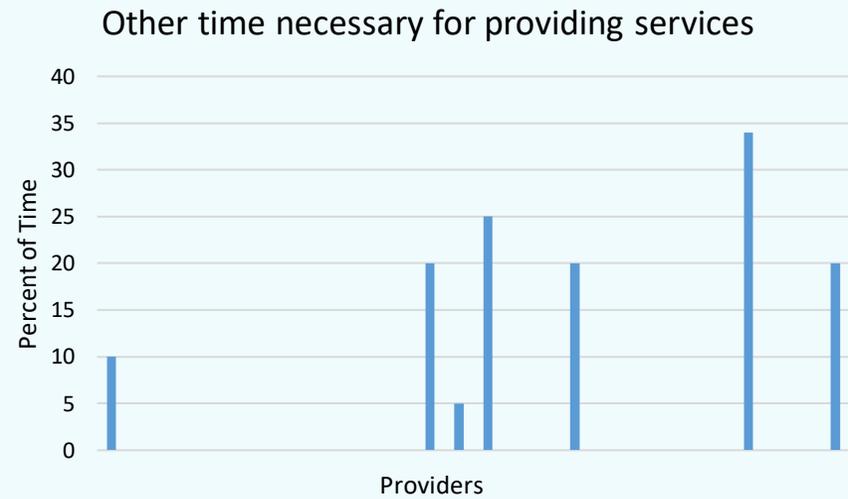


Average Time Spent Per Week (cont.)

Travel Time

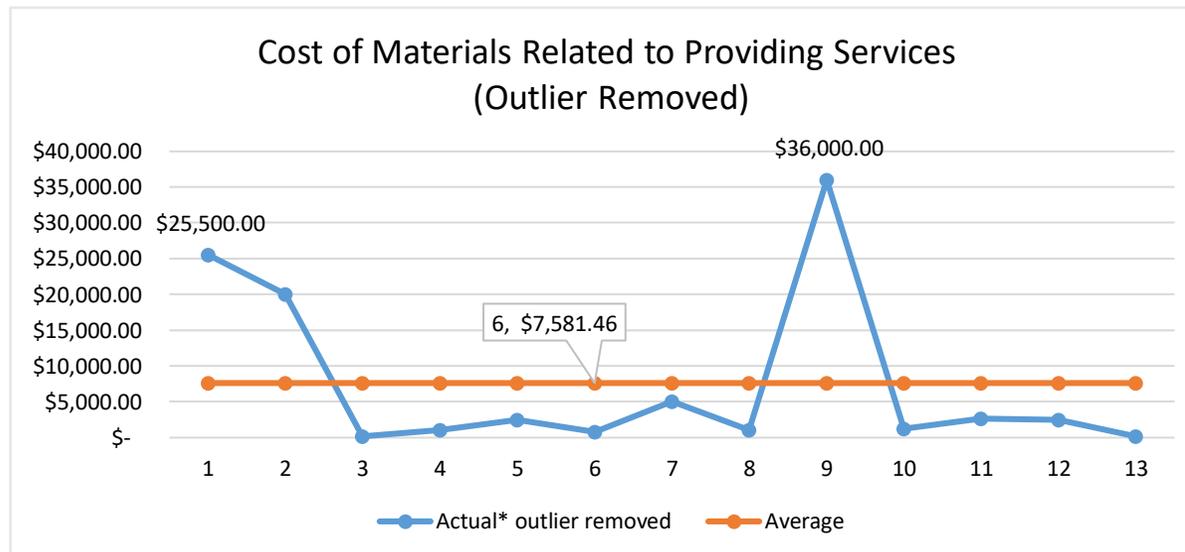
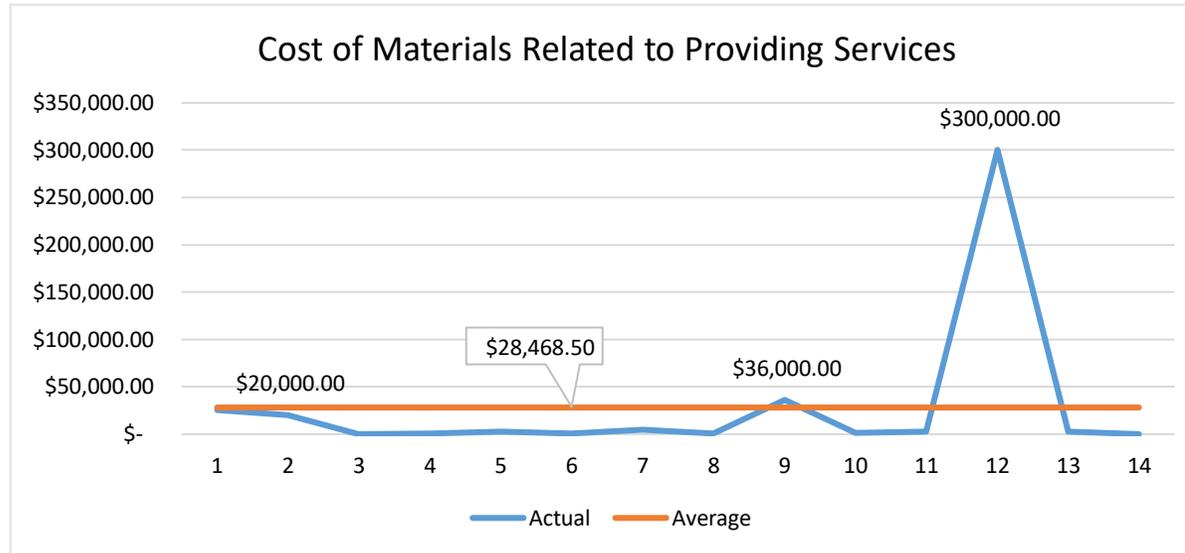


Other time needed for Providing Services



Service Material Cost

- The first chart includes a rough estimate of costs that is higher than that of others. The difference in costs is due to the large discrepancy between clients being served as the high-cost provider has significantly more unique clients than the other respondents (n=14)
- The second chart removes the highest number to provide an average that is more representative of the total number of clients being served by the other providers (n=13).

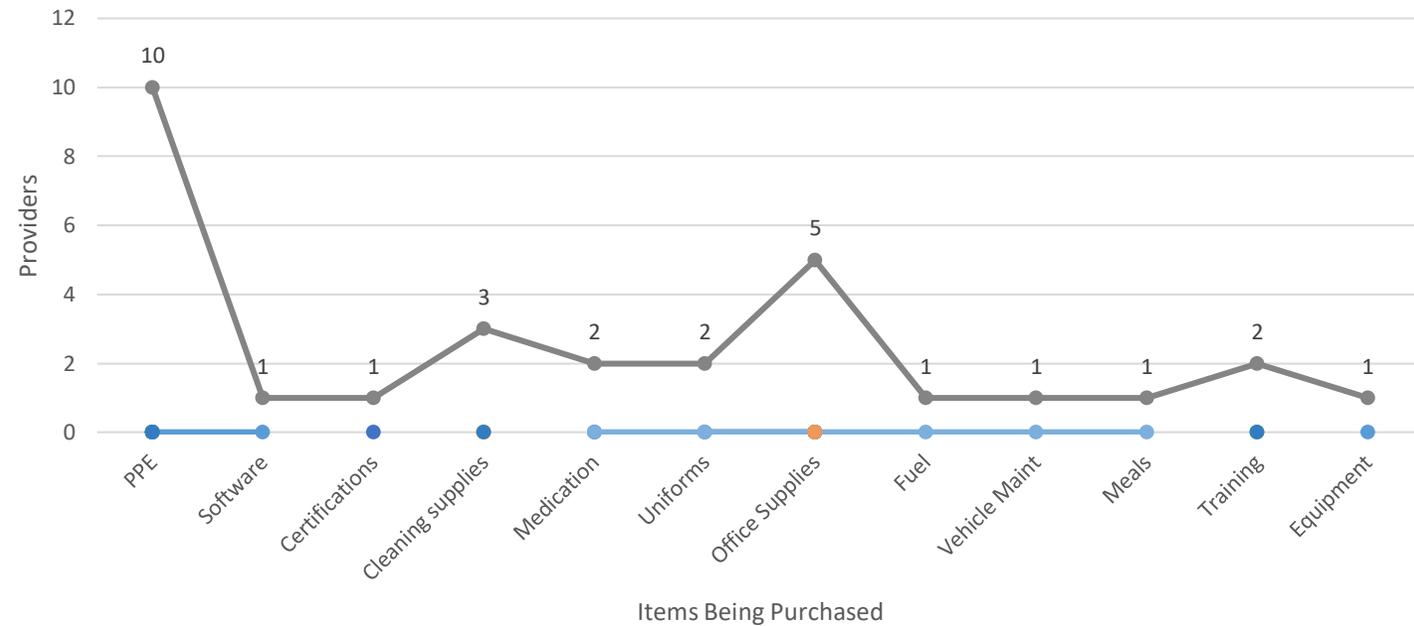


Type of Materials

Summary

- 15 respondents listed examples of materials purchased to support services being provided.
- PPE, office supplies, and cleaning supplies were the three most frequently reported materials purchased.

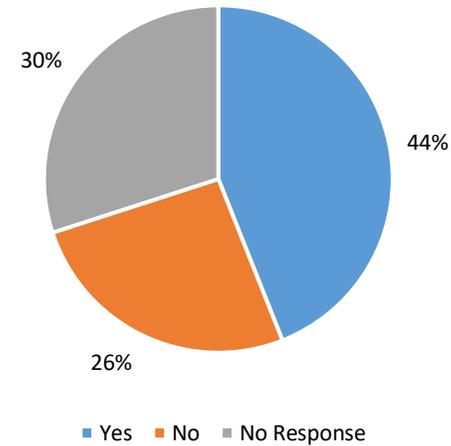
Types of Materials Being Purchased



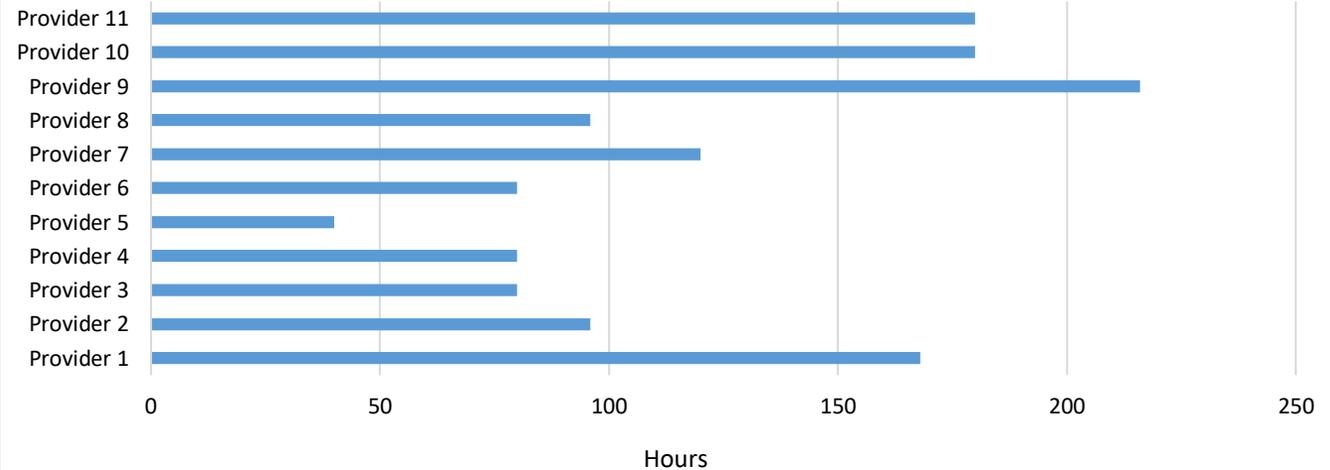
Leave and Medical Insurance

- Survey respondents were asked if they offered their employees paid time off (PTO).
- Respondents (n=11) also provided the range of PTO hours they offer to their employees.

Do Providers Offer Paid Time Off (Sick Leave, Vacation) for Full Time Employees?



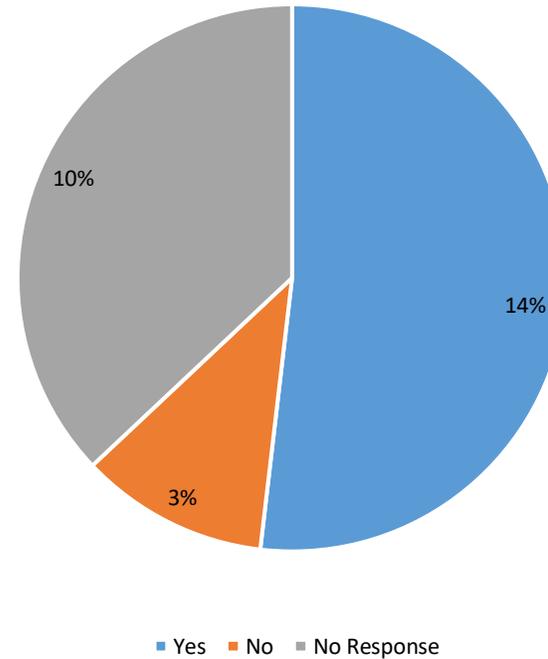
Hours of PTO



Certification Wages

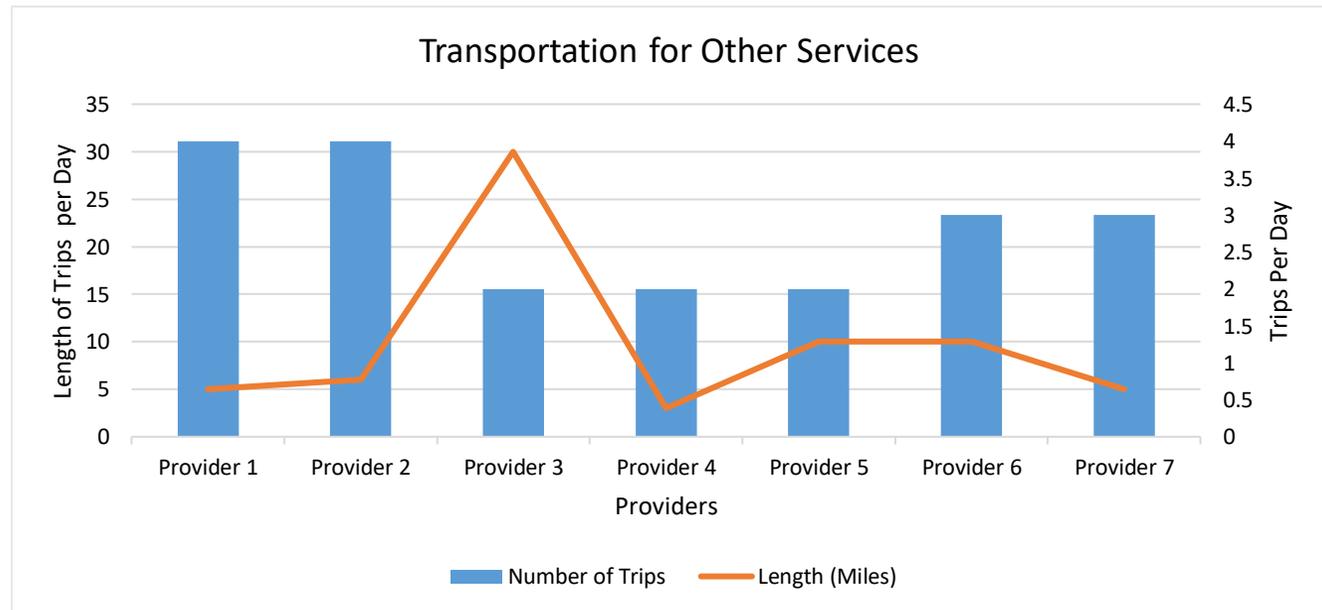
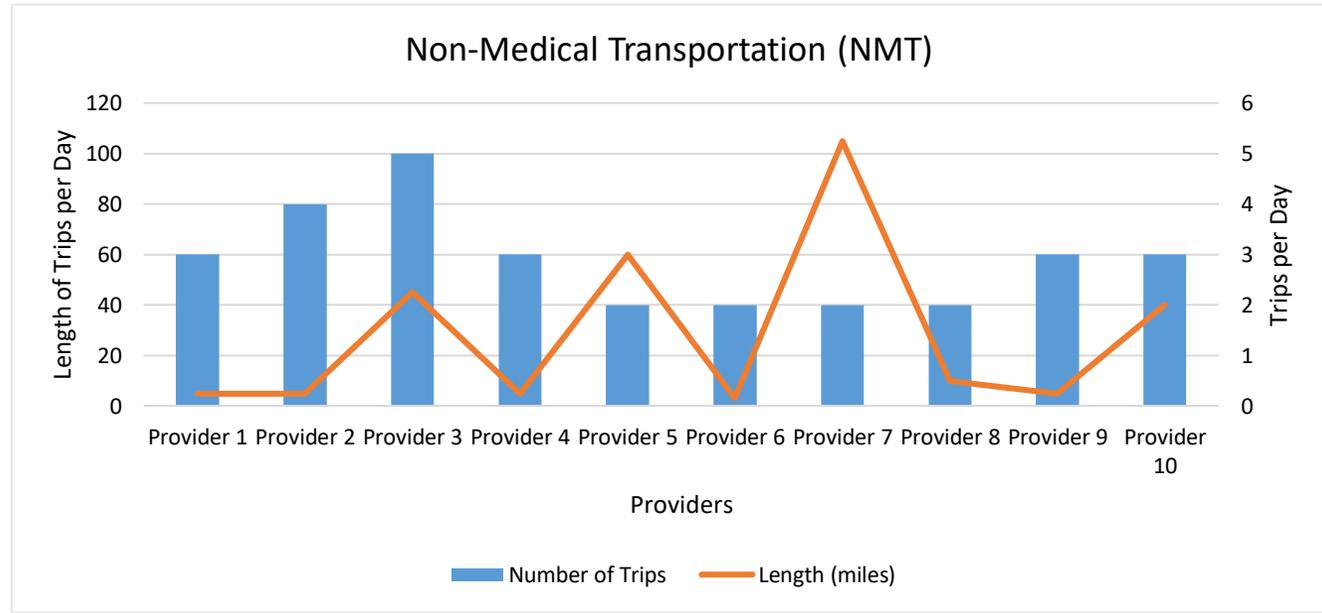
- Respondents (n=18) were asked what percentage of employees have medical certifications.
- They were also asked if those with a certification or additional years of experience were paid a higher hourly wage.

Medical Certifications or Additional Years of Experience
Paid a Higher Hourly Wage



Transportation

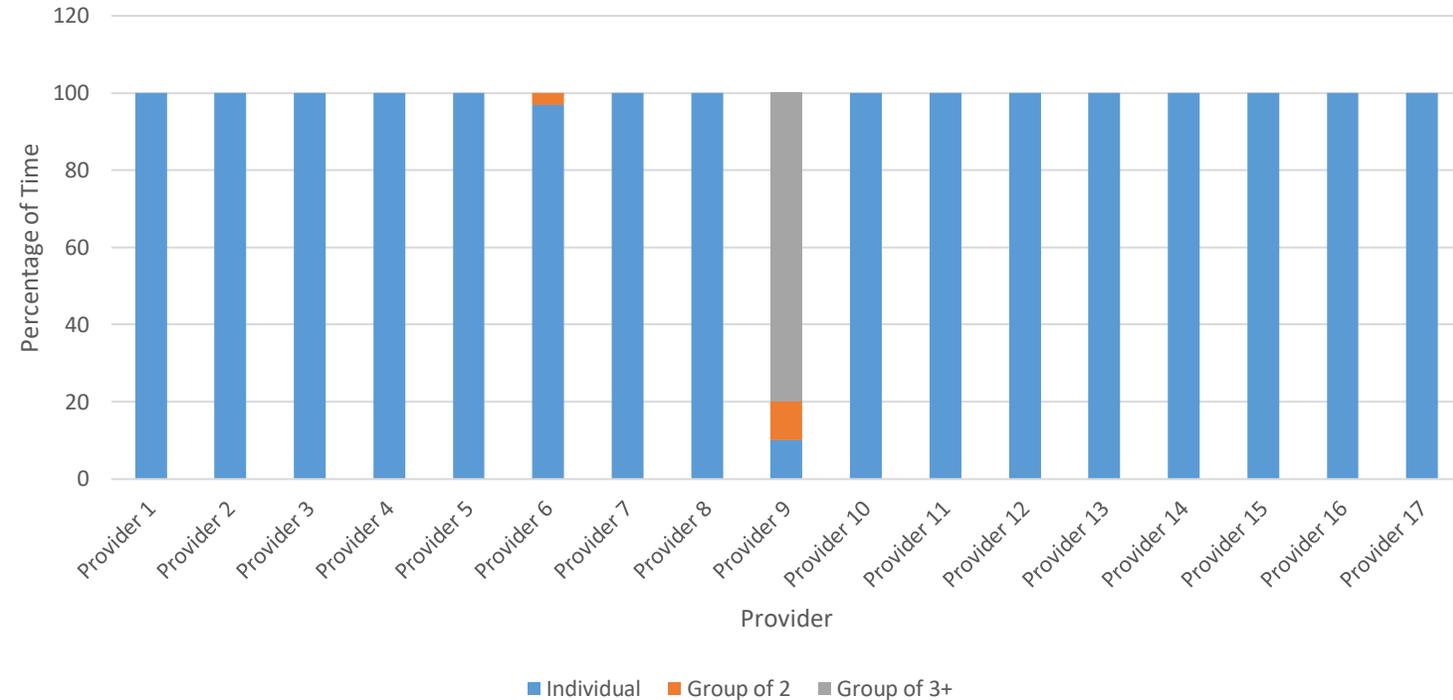
- Respondents (n=19 with 10 responding yes) were asked if they provide Non-Medical Transportation services.
- The QSPs (n=12 with 7 responding yes) were also asked if they transport clients as part of other services.



Clients Served and Setting

- **Most respondents (n=17) served clients on an individual basis.**
- **Two respondents served clients in a group of two or more.**
- **One of those respondents primarily served clients in groups of three or more.**

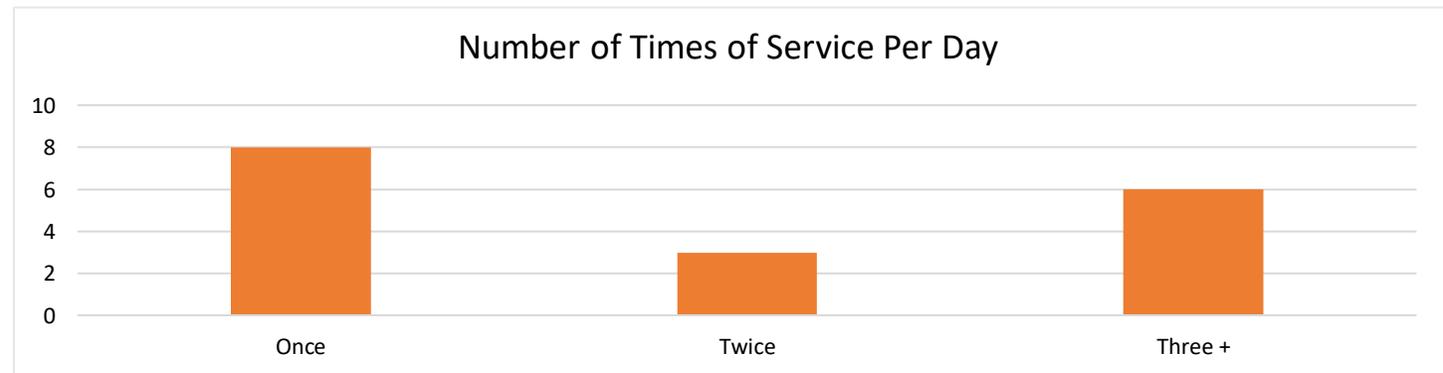
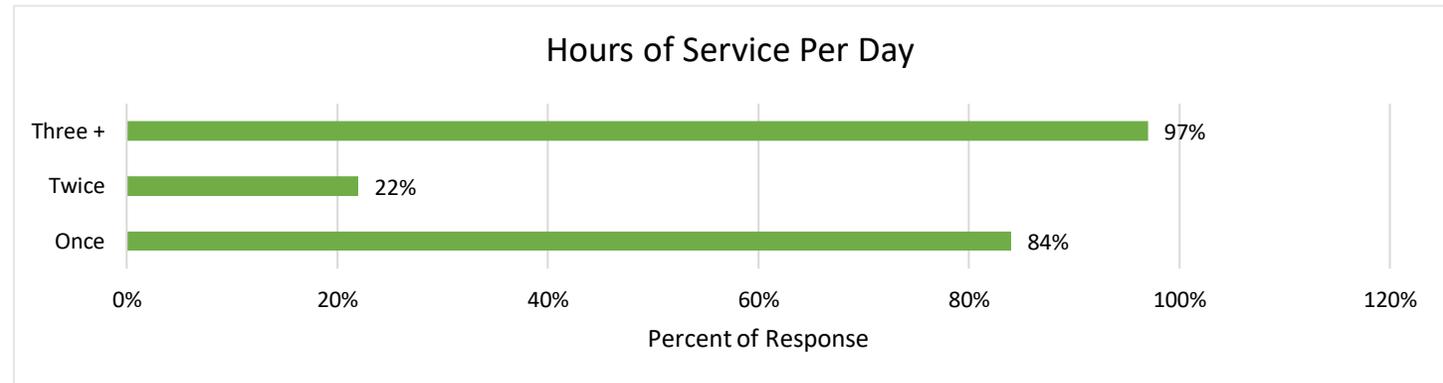
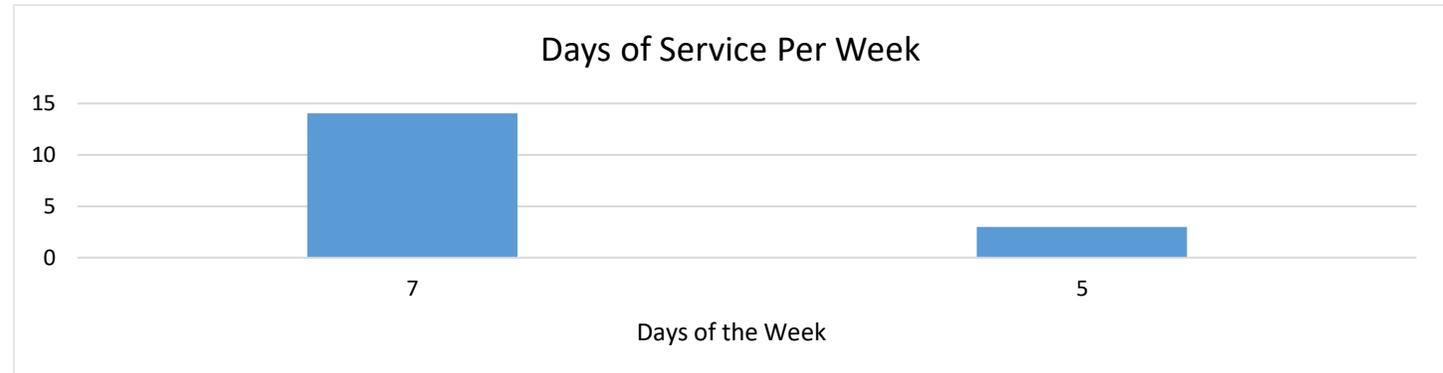
Clients Served by Setting as a Percentage of Time



Service Quality

Respondents (n=17) were asked:

- **Top Chart:** How many days per average week they provide services.
- **Middle Chart:** How often per day they provide services.
- **Bottom Chart:** The average length of time (in hours) that they provide services per day.



Common Themes:

- **Staff wages and Retention**
- **Record High Administrative Burden**
- **Technology**

Other Comments

Common Themes:

- **Staff wages and Retention**

Summarized Provider Comments

Staff Wages and Retention

- Employers responded that they are paying employees when costs are not covered by Medicaid or the state so that they can stay competitive and retain staff:
 - Paid wages for time traveling between clients.
 - Paid wages for time when client is a no-show.
- Due to staffing shortages, more overtime is paid but not reimbursed by Medicaid or state programs.
 - Some provide 24-hour services and work 12-hour days due to staffing shortages.
 - Working on holidays is not reimbursed at an overtime rate.
- Those providers not currently offering benefits such as medical or PTO said they are unable to with the current reimbursement rates. They reported that to be competitive, having the ability to offer those benefits was the most important factor for staff retention.
- Expressed hope that the next legislative session would approve higher reimbursement rates to address recent inflation.
- Identified that wages have increased tremendously, especially with nursing staff and other administrative positions.
- Profit margins have been negatively affected because of higher administrative, wage increases, and the extremely competitive hiring environment.

Other Comments

Common Themes:

- **Record High Administrative Burden**
- **Technology**

Summarized Provider Comments

Record High Administrative Burden

- Employers expressed that administrative costs have reached an all-time high.
- The time required to recoup billed hours has increased due to EVV process and error requirements.
- Smaller providers serving rural areas reported that it is difficult to cover additional costs of doing business such as higher mileage travel costs, Home Health Insurance, Workforce Safety and Insurance (WSI), Travel Time in Rural Areas (concerns expressed):
 - Too much time driving between clients and locations in rural areas and not reimbursed for that time.
 - See fewer clients because of so much time traveling, so able to bill services for fewer people served.

Technology

- Barriers to electronically tracking, scheduling, and keeping unique counts of how many people are served.